

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

16

Application Number

10/656,738

Filing Date

September 5, 2003

First Named Inventor

Joshua Lynn Scott et al.

Group Art Unit

3726

Examiner Name

Omgba, E.

Attorney Docket Number

702-092

Express Mail Label No. EV487233333US

ENCLOSURES (check all that apply)

Fee Transmittal Form

Fee Attached

Amendment / Reply (14 pgs.)

After Final

Affidavits/declaration(s)

Extension of Time Request

Express Abandonment Request

Information Disclosure Statement

Certified Copy of Priority Document(s)

Response to Missing Parts/ Incomplete Application

Response to Missing Parts under 37 CFR 1.52 or 1.53

Drawing(s)

Licensing-related Papers

Petition

Petition to Convert to a Provisional Application

Power of Attorney, Revocation Change of Correspondence Address

Terminal Disclaimer

Request for Refund

CD, Number of CD(s)

After Allowance Communication to Technology Center (TC)

Appeal Communication to Board of Appeals and Interferences

Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

Proprietary Information

Status Letter

Other Enclosure(s) (please identify below):

A check in the amount of \$100.00; and a Return Mail Room Postcard.

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account No. 50-0289.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

Wall Marjama & Bilinski LLP

Richard J. Roos

Reg. No. 45,053

Signature

Date

June 15, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete if Known

JUN 15 2005
Effective on 12/08/2004.
 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FREE TRANSMITTAL
For FY 2005

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	\$100.00
TOTAL AMOUNT OF PAYMENT	
Express Mail Label EV48723333US	

Application Number	10/656,738
Filing Date	September 5, 2003
First Named Inventor	Joshua Lynn Scott
Examiner Name	Omgba, E.
Art Unit	3726
Attorney Docket No.	702-092

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Wall Mariama & Bilinski LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments Credit any overpayments
 of fee(s) under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =	x	=		Fee (\$)
				Fee Paid (\$)

HP= highest paid number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

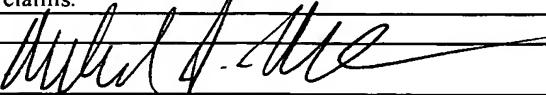
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)	
Other: 2 extra dependent claims.	100.00

SUBMITTED BY

Signature		Registration No. 45,053 (Attorney/Agent)	Telephone 315-425-9000
Name (Print/Type)	Richard J. Roos		Date June 15, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Express Mail No. : EV48723333US

JUN 15 2005

Attorney Docket No.: 702-092

6-16-05

PATENT

EJW
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UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Joshua Lynn Scott et al.

Confirmation No. 9086

Serial No.: 10/656,738

Art Unit: 3726

Filed: September 5, 2003

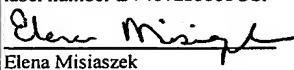
Examiner: Omgbba, E.

Customer: 20874

Title: TIP TOOL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 addressed to **Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450** on June 15, 2005, under "EXPRESS MAIL" mailing label number **EV48723333US**.


Elena Misiaszek

RESPONSE TO OFFICE ACTION

Sir:

INTRODUCTORY COMMENTS

Applicant hereby responds to the Office Action mailed on March 17, 2005, in the patent application identified above. Applicant acknowledges the indication of allowance of claim 15 and the allowability of claims 7 and 11. Applicant respectfully traverses the claim rejections set forth in the Office Action, and respectfully requests reconsideration of the application in light of the amendments and remarks set forth herein.

TABLE OF CONTENTS

Amendments to the Specification begin on page 2 and conclude on page 3 of this paper.

Amendments to the Claims begin on page 4 and conclude on page 9 of this paper.

Remarks begin on page 10 and conclude on page 14 of this paper.

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